

# PUBLIC SUBMISSION

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**Docket:** MSHA-2018-0014  
Dust Retrospective Study

**Comment On:** MSHA-2018-0014-0001  
Retrospective Study of Respirable Coal Mine Dust Rule

**Document:** MSHA-2018-0014-0004  
Comment from Anonymous Anonymous, NA

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## Submitter Information

**Name:** Anonymous Anonymous  
**Organization:** NA

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## General Comment

Dear MSHA-2018-0014-0001 Docket,  
On May 1, 2014, MSHA published a rule entitled Lowering Miners' Exposure to Respirable Coal Mine Dust, Including Continuous Personal Dust Monitors, or the Dust Rule (Regulations.gov, 2018). The intent of this rule is to reduce lung disease in coal miners brought on by chronic exposure to coal dust. MSHA is attempting to conduct a study to evaluate and assess the effectiveness of the Dust rule on actual decreases in coal dust exposure in coal workers. The organization is also welcoming comments that provide any insight into the field of engineering and mining that would make the reduction of coal dust exposure even easier. I strongly agree with this assessment of this rule, as it is gauging whether the rule is actually working, and it may bring results that will make this goal more easily achievable.  
According to the Centers for Disease Control and Prevention, a dangerous lung disease that plagues coal workers is coal workers pneumoconiosis (CWP or black lung) (Centers for Disease Control and Prevention, 2011). This disease takes years to accumulate, but becomes severe if left untreated and can cause lung impairment and disability (Centers for Disease Control and Prevention, 2011). Another disease caused by constant coal dust exposure is chronic obstructive pulmonary disease (COPD). This lung disease makes breathing difficult, and can be caused by long term exposure to air pollution and dust (American Lung Association, 2018). Both of these diseases are life threatening, and their risk factors must be tracked in the vulnerable population of

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coal workers with this Dust rule.

Currently, a highly used assessment tool by MSHA for the level of danger presented by coal dust accumulation is the Coal Dust Explosibility Meter (CDEM) (Department of Health and Human Services, 2012). While this is an effective tool, MSHA is accepting new engineering and methods of coal dust hazard measurement in order to continually improve the Dust rule. I oppose any delay in recruiting any and all new sources of information on making assessing coal dust hazards more efficient. I strongly support this revisiting of the logistics of the Dust rule by MSHA because implementations must always be consistently evaluated in order to ensure that they are completing their mission at peak efficiency; if they are not, these types of assessments allow them to be improved greatly.

#### References:

American Lung Association. (2018). Chronic Obstructive Pulmonary Disease (COPD). Retrieved from <https://www.lung.org/lung-health-and-diseases/lung-disease-lookup/copd/>

Centers for Disease Control and Prevention. (2011). Pneumoconioses. Retrieved from <https://www.cdc.gov/niosh/topics/pneumoconioses/default.html>

Department of Health and Human Services. (2012). Coal Dust Explosibility Meter and Recommendations for Application. Retrieved from <https://permanent.access.gpo.gov/gpo37644/ic9529.pdf>

Regulations.gov. (2018). Retrospective Study of Respirable Coal Mine Dust Rule. Retrieved from <https://www.regulations.gov/document?D=MSHA-2018-0014-0001>